

PtD Global Indaba PROGRAMME

DAY 1 Wednesday, 6 March 2024

08:30 – 09:15 OPENING CEREMONY

Welcome to the PtD Global Indaba

Speakers Kofi Aboagye-Nyame, Management Sciences for Health; **Dominique Zwinkels**, People that Deliver

Keynote address

Speaker Niti Haetanurak, Deputy director general, Department of Disease Control, Ministry of Public Health, Thailand

Speaker Ittichote Chuckpaiwong, Vice President for Environment and Sustainable Development, Mahidol University

09:20 – 10:20 PLENARY PANEL

Emergency response & HR: Lessons learned to shape a post-pandemic workforce

Ever since the words 'COVID-19 pandemic' first entered our vernacular, organisations and countries have been talking about building back better. But has the global health system built back better? Are health supply chains stronger than they were? Following the pandemic, what is the state of the global health supply chain workforce? And are countries giving the health supply chain workforce sufficient support to give us hope that, in the near future, service interruptions and stockouts will be condemned to history?

Moderator Kofi Nyame, Management Sciences for Health

Panellists Olubunmi Aribeana, Nigeria MOH; **Ork Vichit**, MOH Cambodia; **Joe Ruiz**, UPS; **Mwenge Mwanamwenge**, Gavi

10:20 – 10:45 Tea & coffee break

10:45 – 11:45 BREAKOUT SESSION 1

Establishing a new cadre or unit

Facilitator Rawinkhan Srinon, Mahidol University

1 [Enhancing supply chain performance by establishing Health Products and Technologies Units in Kenya](#)

Eunice Gathitu, Ministry of Health Kenya; **Mr Daniel Menge** USAID GHSC-PSM

Kenya's health products and technologies (HPT) supply chain strategy 2020-2025 seeks to ensure HPT availability through functional supply chains, which requires strengthening HPT governance and accountability structures. This presentation explores the approach adopted to identify workforce and capacity gaps, establish multidisciplinary teams in county HPT units (HPTUs) and embed governance structures at sub-national levels to improve availability of products through functional supply chains.

2 [Empowering local decision-making through the introduction of a new cadre within a centralized oxygen management framework](#)

Aishwarya Agarwal, Clinton Health Access Initiative

Following the COVID-19 pandemic, maintaining the oxygen supply infrastructure presented facility-specific and HR dependent challenges. Solutions developed through ongoing collaboration between state-run district hospitals included developing a new cadre of hospital managers with extended operational responsibilities and administrative expertise for oxygen nodals.

3 [Logistics assistants initiative for the distribution of health products and inputs to the last mile in Mali \(French\)](#)

Daga Maiga, UNFPA; Aichatou Maiga, Direction de la Pharmacie et du Médicament Mali

In Mali a pilot demonstrated increased supply chain technical capabilities by positioning qualified agents as logistics assistants a district level. The initiative is part of a five-year implementation plan and ten-year health strategy to guarantee access to good quality, safe and effective health services and products, regardless of geographical or financial situation, and to promote the rational use of medicines.

PANEL Practical approaches to professionalisation

Strategies and initiatives to professionalise the health supply chain workforce, from process mapping in Rwanda to a comprehensive HR assessment and professionalisation strategy in DRC.

Moderator Timi Omole, IAPHL **Facilitator** David Crewe-Brown, Vitalliance Corp

Panellists Michael Egharevba, USAID GHSC-PSM; Shelby Kemper, Kemper Pharmaceutical Services;

Vicent Manyilizu, inSupply Health

PANEL The STEP 2.0 approach to transforming supply chains in Asia: Learning, coaching and performing

There is growing need to build adept leadership and change management competencies in the complex landscape of Asian public health supply chains. This is evidenced by the need to navigate dynamic demands, optimize processes, and instil a culture of adaptability and continuous improvement to ensure resilient and efficient supply chains for health products.

Empower Swiss and MSH recognized the need for leadership and change management competency development in the region. With funding support and advocacy from IFPW Foundation and Global Fund, Empower and MSH reached out to public procurement and supply chain management (PSCM) professionals working in national, governmental agencies to enrol them as participants in the first regional STEP 2.0 Asia cohort. Twenty participants from 6 countries were selected with the focus on creating PSCM transformational agents of change through the STEP delivery in partnership with private sector coaches. This panel seeks to delve into perspectives of the facilitator, coach and participants in STEP ASIA.

Moderator Paul Lalvani, Empower School of Health **Facilitator** Kevin Etter, PtD/Gavi

Panellists George Bray, IFPW Foundation; Andrew Brown, Management Sciences for Health; Altaf Bijarani, IAPHL ambassador Pakistan;

Thuy Ngoc Nguyen, MOH Vietnam; Katrina Tobias, Johnson&Johnson

PANEL Innovative approaches ensuring a systems approach to workforce when undertaking PSCM strategic change

Pharmaceutical supply chain management (PSCM) systems of LMICs historically lack the maturity associated with the well-developed health supply chains of high-income countries. A lack of sufficient workforce with the required competencies is a limiting factor when strategic PSCM interventions are undertaken aimed at maturing PSCM systems in LMICS.

Management Sciences for Health (MSH), through its project in Ukraine (SAFEMed), and VillageReach in Liberia are applying systematic, data driven approaches to PSCM maturity that have a systematic focus on workforce requirements as a key enabler for sustainable systems improvement.

Moderator Andrew Brown, Management Sciences for Health **Facilitator** Shelby Kemper, Kemper Pharmaceutical Services

Panellists Edem Adamanov, MPU; Celsa Muzayire Gaju, Rwanda Medical Supply Ltd; TBD

Considering gender in health supply chain management

Facilitator Hilary Claire Frazer, People that Deliver

1 Revolutionizing healthcare: Bridging gender gaps for sustainable supply chain management and universal health coverage

Miyanda Maila, Clinton Health Access Initiative

Although health outcomes in low- and middle-income countries have improved, the healthcare workforce needs continuous development for universal health coverage. Research in Zambia's Eastern and Southern provinces recommends capacity development for staff providing sexual, reproductive, maternal, newborn, child and adolescent health and nutrition services. As part of a gender strategy, it is important to develop training materials that bridge supply chain knowledge and skills gaps. Specific interventions tailored to healthcare workers and community-based volunteers address demand and supply, underscored by need for a shift in healthcare approaches.

2 Co-creation for gender-equitable and socially inclusive supply chains: a focus on the workforce

Yasmin Chandani, inSupply Health; Lisa Bowen, JSI/WI-HER

A gender-equitable and socially-inclusive supply chain requires a diverse workforce that represents its clientele. Examples will be given of two strategies that prioritise inclusion through equitable recruitment, promotion and opportunity, as well as reducing barriers to participation, changing norms and strengthening workplace conditions.

3 Gender in the public health supply chain workforce: Research findings and recommendations to improve gender balance

Rebecca Alban, VillageReach

Gender inequity in the public health supply chain workforce, particularly leadership, has the potential to impact the accessibility, acceptability and affordability of healthcare services among women and children. This presentation will showcase a qualitative research project based on the JHPIEGO Gender Analysis Framework, which used key informant interviews to describe the current PHSC gender landscape in DRC, Malawi and LMICS generally. Better understanding informs recommendations to governments, implementers and other researchers.

PANEL Fostering health supply chain management leadership in Africa & Asia

From STEP 2.0 in Cambodia to fostering ministry of health leadership in Zambia and developing a supply chain excellence team in Indaba, this discussion will centre on interventions that have enhanced supply chain leadership and pinpoint the critical success factors.

Moderator Walter Proper, IAPHL Emeritus/PtD **Facilitator** Patrick Gaparayi, UNFPA

Panellists Thanh Bui, GaneshAID; Tomeshkumar Harinkhede, PATH; Wendy Nicodemus, USAID eSCMIS project

12:50 – 14:00 Lunch, Feast restaurant

14:00 – 15:00 BREAKOUT SESSION 3

Partnerships as a tool to enhance supply chain performance

Facilitator Patrick Gaparayi, UNFPA

1 [Improving DRC's SCMS by strengthening local supply chain organisations to promote linkage between public and private sectors](#)

Lauren Herzog, USAID MTaPS, Management Sciences for Health

DRC lacks established local supply chain professional associations supporting the public supply chain for health products, with limited private sector integration. Weak engagement, limited accountability and oversight make it difficult to sustain system improvements through donor support. The MTaPS Program has been assisting the integration of AGCAL, a private SC professional association, into existing SC structures at national and provincial levels, supporting SOP development and providing technical and financial support to develop leadership and change management competencies in key executive members through remote coaching and mentoring.

2 [South Africa study tour to Malawi offers replicable lessons on south-to-south learning](#)

Yankho Luwe, Ministry of Health, Malawi

Increased access to equitable health care services requires strong and resilient supply chains. Rwanda, Ethiopia and Ghana have made significant progress towards this and universal health coverage. Yet, there are limited platforms and frameworks to facilitate learning exchanges between Global South countries. Malawi Ministry of Health hosted a delegation from South Africa, facilitating peer-to-peer learning allowing delegates to see first-hand design, operationalisation and sustainability approaches to solving health problems through complementary services built into the government's strategic plans and budgets.

3 [Co-creating solutions to cold chain maintenance challenges: Results from three countries](#)

Vicent Manyilizu, inSupply Health

As immunization programmes expand with the introduction of new vaccines and technologies, cold chain has become even more critical to ensure vaccines are available. We conducted a human-centred design (HCD) activity in three countries: Niger, Kenya and Tanzania. Our goal was to understand challenges faced in the maintenance of cold chain equipment and to co-create solutions with technicians and supply chain teams to create more proactive and efficient maintenance systems. Co-creation workshops provided a platform for stakeholders to craft solutions to design questions and challenges.

Strategic collaboration and in health supply chains

Facilitator Hilary Claire Frazer, People that Deliver

1 [Exploring the enabling power of PSM Workforce for global health PSM priorities identified by the ISG](#)

Ines Pozas Franco, ISG & Funders' Forum

How can the Interagency Supply Chain Group best engage with the global health and public health supply chain communities in the future? Come and learn more.

2 [Partnerships and transformative outcomes in health supply chains](#)

Wendy Nicodemus, USAID eSCMIS project

The USAID eSCMIS project in Zambia aims to enhance healthcare supply chains through digitalisation. Led by John Snow Health Zambia Limited, this five-year initiative collaborates with public and private entities to ensure availability of essential medical products and enhance supply chain efficiency. Initiatives include TV white space technology for broadband, renewable energy provision and responsible electronic waste management. Collaborations address malaria commodity security, vaccines information systems and last-mile distribution of condoms. Engagement with the University of Zambia also ensures future supply chain leaders have the necessary skills.

WORKSHOP [Gamification for Reinforcing the skills and competencies in managing the nOPV2 vaccine logistics and cold chains](#)

GaneshAID was tasked by UNICEF to enhance the technical management of nOPV2 in high-risk countries, addressing gaps in existing training methods. To this end, the GaneshAID Academy developed a trainer package featuring a tabletop game aimed at health workers of varying levels. This game, part of a comprehensive nOPV2 CCL&VM workshop, utilized gamification to reinforce knowledge and skills in cold chain logistics and vaccine management. Feedback from participants highlighted a notable improvement in understanding and satisfaction, affirming the game's efficacy in boosting the competencies of health supply chain professionals.

Facilitator Khanh Van Bui, GaneshAID

Timekeeper Shelby Kemper, Kemper Pharmaceutical Services

15:05 – 16:05 BREAKOUT SESSION 4

Innovating for resilient and data driven supply chains

Facilitator Altaf Bijarani, MOH Pakistan

1 [In pursuit of supply chain resiliency: A new readiness and simulation approach](#)

Jim de Vries, The SCRM Consortium; Ahmad Habash, Help Logistics

To analyse NGO healthcare supply chains in Yemen, the SCRM Consortium developed self-paced, online healthcare courseware within an LMS platform of supply chain and risk management resources and best practices. This includes video clips, case studies, quizzes and an online cloud-based SCM assessment assignment tool, leveraging 40 years of global experience and AI-ML algorithms. It will include digital modelling of the NGO supply chain network and WHAT-IF simulations to identify bottlenecks, improve delivery performance, enhance skill sets and mitigate risks.

2 [Professionalizing the supply chain workforce through regular IMAT use for systematic record-keeping and monitoring in Togo](#)

Haguiratou Daou Ouedraogo, Chemonics/GHSC-TA Francophone Task Order

In Togo, knowledge gaps of health workers in supply chain management persist. Stock managers in warehouses are left without the tools necessary to manage inventory effectively, contributing to high variation, frequent stockouts and the expiration of essential commodities. Learn about a project that supports the MoH by training health district professionals to use the Inventory Management Assessment Tool (IMAT). Since 2020, a national pool of 39 stock managers have training and conducted quarterly audits to improve inventory controls and stock accuracy in 15 warehouses at central, regional and district levels.

Capacity building

Facilitator Dauda Majanbu, VillageReach

1 [Building capacity for reproductive health product quantification: A scalable and sustainable approach](#)

Lidia Porto, UNFPA

The COVID-19 pandemic highlighted the need for a shift from traditional in-person training to more flexible learning methods in RH product quantification. UNFPA responded by developing a comprehensive training package based on the People that Deliver Competency Framework, consisting of 5 modules with 20 lessons, adaptable for in-person, virtual, or eLearning formats. This approach enables continuous learning and knowledge exchange through a community of practice, with mentorship to support the application of new skills in the workplace, ensuring a sustainable and scalable solution to capacity building challenges.

2 [Strengthening community health workers' capacity for stock management and service provision at the last mile](#)

Tamara Hafner, USAID MTaPS, Management Sciences for Health

This study addresses the lack of reliable stock and service delivery management among community health workers (CHWs) providing family planning (FP) in Zambia's Luapula Province. By deploying a digital tool on OpenSRP for 104 CHWs, it integrates FP service and commodity management, enhancing efficiency and reducing unmet FP needs. The solution includes training, tablets and support, improving FP delivery at the last mile through better stock management and service provision.

3 [Investing in people for public health supply chain: A case study from Sudan](#)

Gamal Mohamed Ali; Presented by Andrew Barraclough, Empower School of Health

Facing challenges in delivering medicines due to inadequate HR investments, the National Medical Supplies Fund (NMSF) in Sudan implemented a comprehensive HR development programme to enhance supply chain performance. This solution encompasses the creation of a training centre, performance-based incentives and improved working conditions, including computers, software, free transport, uniforms and health insurance. These measures aim to retain skilled staff, ensuring efficient and cost-effective medicine distribution.

DAY 1 Wednesday, 6 March 2024

PANEL Youth in health supply chains

This panel discussion will explore how to better attract youth to a career in health supply chain management and will examine an example of youth engagement from Zambia. The panel will also feature a recent entrant to the supply chain profession: Ni Hlaing from Myanmar.

Moderator Shelby Kemper, Kemper Pharmaceutical Services **Facilitator** Rawinkhan Srinon, Mahidol University

Panellists Meaghan O'Keefe Douglas, USAID; Wendy Nicodemus, USAID eSCMIS project; Nwe Ni Hlaing, Mahidol University; Piyatida Panitsupakamol, Mahidol University

16:05 – 16:35 **POSTERS, tea & coffee**

16:35 – 17:35 **PLENARY PANEL**

The supply chain workforce of the future: Keeping up with innovations and changing landscapes

With the rapid development and adoption of new technologies, such as artificial intelligence, some could be forgiven for their apprehension over the future of the health supply chain workforce. But is this apprehension warranted? Or do innovations provide an opportunity for health supply chains and the human resources that run them? Above all, come and hear about how the workforce can prepare for and thrive in such a dynamic and fast-changing landscape.

Moderator Iain Barton, Health 4 Development

Panellists Ines Buki, Chemonics; Lombe Kasonde, World Bank; Vicky Koo, WILAT/DAI; Dr Supa Pengpid, Mahidol University

17:35 – 17:45 **CLOSING**

Walter Proper, IAPHL Emeritus/People that Deliver

18:00 – 20:00 **EVENING ENTERTAINMENT**

Time for a drink: Cocktails with PtD

The Terrace, Giorgio's restaurant

DAY 2 Thursday, 7 March 2024

08:30 OPENING

Start as you mean to go on

Speaker Andrew Brown, MSH

Arrive on time for your chance to win a prize!

08:50 – 09:15 IMPULSE TALKS

The Indaba's answer to TED talks

Moderator Trip Allport

- 1 Motivating underpaid public health personnel, Walter Proper, IAPHL Emeritus/PtD
- 2 Innovate, educate or stagnate, Joe Ruiz, UPS
- 3 The last inch of the last mile, Siradol Airidhara, Mahidol University

09:15 – 10:15 PLENARY PANEL

Professionalising the supply chain workforce: How to capitalise on momentum

Over the last couple of years more and more countries have pushed 'professionalisation of the supply chain workforce' to the top of their list of priorities. But why should other countries follow suit and what does past experience teach us about the best way to encourage them to do so? Come and join this discussion about how to capitalise on professionalisation's snowballing momentum.

Moderator Bridget McHenry, USAID

Panellists Douglas Kent, ASCM; Paul Lalvani, Empower; Tapiwa Mukwashi, VillageReach; Azuka Okeke, ARC-ESM

10:15 – 10:35 Tea & coffee

10:35 – 11:35 BREAKOUT SESSION 5

PANEL Building an inclusive supply chain workforce – innovative partnership examples for gender representation

Women lack sufficient representation in leadership and decision-making within supply chain networks and workforce. Yet, a more gender-representative health supply chain can better adapt to emerging challenges. Our panel discussion highlights learnings, challenges, and successes from Central Asia and Kenya to promote gender diversity in supply chain. First, we feature a partnership between DAI and Women in Logistics and Transport (WiLAT) under the USAID Trade Central Asia program. Second, we discuss learnings from Pamela Steele Associate's "Girls on the Move" mentorship program in Kenya, which introduces female graduates to supply chain careers. The panellists describe their efforts to build a supply chain workforce that truly represents its service population.

Moderator Rachel Couper, DAI Facilitator Katrina Tyson, Health 4 Development

Panellists Hussan Bano Burki, DAI; Vicky Koo, WILAT/DAI; Pamela Steele, Pamela Steele Associates

Motivation: Supply chain management's secret weapon

Facilitator Walter Proper, IAPHL Emeritus/PtD

4 [Strengthening last-mile delivery of essential drugs in Punjab through digital transformation](#)

Karthik Adapa, Government of Punjab

In Punjab, a study comparing two compensation models for pharmacists in digitised drug management systems at primary health units highlighted the impact on productivity. The productivity-based model, linking pay to patient numbers, resulted in higher productivity and motivation due to increased patient footfall. Conversely, the minimum income guarantee model, offering fixed pay regardless of performance, led to lower motivation and productivity. This evidence suggests that optimal compensation models are crucial for enhancing pharmacist productivity in LMICs alongside digitisation.

5 [Sustainably Improving Working Conditions, Staff Motivation and Skills at 10,000 Service Delivery Points in DRC](#)

Kim van der Weijde, i+solutions

Facing challenges across 10,000 service points, a strategy was implemented to boost morale and working conditions for last mile supply chain staff. This includes empowering staff, using mobile money for transportation, and creating a governance model with quarterly health zone manager meetings. These meetings assess performance, share experiences, and foster collaborative problem-solving. Innovations like health zone delivery plans and the DISMED application support this approach, aiming to sustainably improve working conditions, motivation, and skills, enhancing continuous service delivery.

Building the capacity of the supply chain management workforce

Facilitator Hilary Claire Frazer, People that Deliver

1 [Enhancing pharmaceutical systems through remote capacity strengthening: Results and sustainability](#)

Andrew Brown, Management Sciences for Health

To ensure access to medicines, the MTaPS initiative addressed the need for strengthening pharmaceutical systems by enhancing local organisations' competence. MTaPS introduced a remote training approach, creating a comprehensive resource library covering nine pharmaceutical areas and conducting virtual sessions for participants in Southeast Asia and East Africa. This was followed by a ten-week intensive coaching period, during which selected organisations applied these resources to solve real-world problems, successfully improving their pharmaceutical system support capabilities.

2 [Tailored threads: Level-based curriculum for holistic supply chain health system improvement](#)

Leticia Buluma, inSupply Health

Addressing the complexity of health supply chains and varying competency needs across healthcare levels, a tailored, level-based supply chain curriculum was developed, informed by human-centred design research. This solution introduces two innovations: learning packages (LPs) and the supply chain chatbot. LPs provide customised training modules for different healthcare levels, while the chatbot facilitates continuous, on-demand learning. Together, they aim to enhance health workers' capacity, ensuring efficient product delivery and bridging skills gaps effectively.

PANEL Empowering supply chain leaders to lead

Ushering in a new culture of leadership or organisational change can often be challenging but the rewards for both personnel and patients can be transformational. This discussion will centre on empowering the supply chain workforce to overcome obstacles and increase health commodity access.

Moderator Kevin Etter, PtD/Gavi **Facilitator** Gladys Muhire, Catholic Relief Services

Panellists Ana Brou Santiago, Catholic Relief Services; Engdayehu Dekeba, Ethiopian Pharmaceuticals Supply Service;

Vicent Manyilizu, inSupply Health

Frameworks to develop your supply chain management workforce

Facilitator David Crewe-Brown, Vitalliance Corp

1 [Workforce management framework for implementing digital supply chain information systems](#)

Jean Miller, Chemonics International

Facing challenges in HR planning for supply chain information system (SCIS) implementations in LMICs owing to budget and resource constraints, a comprehensive SCIS workforce framework was developed. This framework, informed by industry best practices, outlines technology models like SaaS, on-premises and cloud hosting, alongside necessary HR strategies. It provides detailed roles, responsibilities and guidance on HR models to enhance public health supply chains, ensuring the right resources are engaged for successful implementation and sustainable user adoption.

2 [Workforce development: UNICEF Supply Division's crosscutting focus](#)

Buya Jallow, UNICEF Supply Division

UNICEF Supply Division identified a non-systematic approach to HR capacity development in immunization supply chains, leading to suboptimal learning and performance. To address this, UNICEF employs the maturity model for assessing supply chains, revealing gaps in personnel and practices. Through learning or training needs assessments, a structured and sustainable training strategy is devised, focusing on skills mapping, analysis and planning tailored to country-specific needs. This approach aims to enhance individual productivity and align competencies with organizational objectives, thereby strengthening the supply chain backbone.

3 [The quality management improvement approach \(QMIA\) leads to workforce development in Rwanda's health supply](#)

Ines Buki, USAID GHSC-PSM Project

Rwanda's health supply chain faced challenges including high staff turnover, stockouts and low eLMIS use. In response, GHSC-PSM and the MOH introduced the quality management improvement approach (QMIA) in 2017, focusing on mentorship, supervision and best practices sharing. This initiative, involving key stakeholders like Rwanda Medical Supply Ltd, Rwanda Biomedical Center and the Bureau of Approved Medical Training of Rwanda, aimed to enhance capacity in warehousing, inventory management and data accuracy. QMIA has improved supply chain efficiency and inventory data accuracy under MOH oversight, addressing critical system weaknesses.

DAY 2 Thursday, 7 March 2024

PANEL A roadmap for a future-ready public health supply chain workforce in India

India's public health supply chain workforce faces chronic challenges of skill gaps, limited training and fragmented information management. This panel discussion will centre on supply chain management assessments conducted by PATH and partners. These assessments have yielded roadmaps that address HR professionalisation, leadership, public-private collaboration and digitalisation.

Moderator Akash Malik, Bill and Melinda Gates Foundation **Facilitator** Hilary Claire Frazer, People that Deliver

Panellists Harsh Mangla, IAS, MOHFW India; Ajay Patle, PATH; Chelule Gideon, Unicef India;

Janardhanan Nivas, Government of Andhra Pradesh

12:40 – 13:50 Lunch, Feast restaurant

13:50 – 14:50 BREAKOUT SESSION 7

Leadership and professionalisation in supply chain management

Facilitator Gladys Muhire, Catholic Relief Services

1 [Supply chain investment coordination approach – Strengthening government supply chain leadership to improve access to quality medicines](#)

Guy Mussamba Iglima, VillageReach

In the DRC, medicines are a vital pillar of healthcare system development but their availability, quality and management face challenges. These issues weaken the healthcare system due to weak leadership, insufficient competent human resources, and lack of coordination among partners. The SCICA was established to address these issues.

2 [Building health commodities managers' capacities and leadership for a stronger health supply chain in Madagascar](#)

Martine Hanitriniaina Zafindrainibe, Regional Department of Malagasy, Ministry of Public Health

Madagascar's public health supply chain leaders and operations face numerous challenges, such as inaccurate quantification of essential health commodities, lack of coordination in ordering and distribution, non-timely reporting on logistics data and poor staff performance management. The USAID-funded improving market partnership and access to commodities together (IMPACT) program supported the Ministry of Public Health to strengthen supply chain workforce development. In 2022, IMPACT organised two collective learning certificate (CLC) programmes focusing on core, enabling and fundamental functions of the public health supply chain as well as a leadership development program (LDP+), which is a team-based problem-solving approach developed by Management Sciences for Health.

PANEL What the private sector can teach us about professionalisation of the PSCM workforce – A Southeast Asian perspective

Government-led PSCM systems for health products of LMICs have historically lacked the maturity associated with the well-developed health supply chains of high-income countries. Private companies dominate health supply chains in the South-East Asian region, with medium and large size companies implementing HR management approaches that seek to select and retain good talent, encourage career growth and optimize productivity.

In this panel ASCM (Asia), Mahidol University and Zuellig Pharma share their experiences of workforce issues in the region while PtD will be explaining the relevance of their frameworks of HR for SCM ToC and professionalization to the region.

Moderator Andrew Brown, Management Sciences for Health **Facilitator** Kevin Etter, PtD/Gavi

Panellists Laksaman Choosiri, Zuellig Pharma; Jan de Leon, ASCM; Rawinkhan Srinon, Mahidol University; Dominique Zwinkels, PtD

Measuring success: Measurement benchmarking

Facilitator Patrick Gaparayi, UNFPA

1 [The Technical Independence Indicator: Sustainability measurement as a catalyst for garnering political support for HR capacity development](#)

Michael Cohen, Chemonics International

The technical independence indicator is the GHSC-PSM project's novel approach to predicting project sustainability. It incorporates human resources capacity development as an essential component of long-term sustainability. Measured in 28 countries since 2019, the methodology encourages national governments to increase focus on establishing institutional training approaches that help insulate against staff turnover.

2 [Benchmark of transformational challenges and solutions implemented in Africa and Asia using STEP 2.0 model: From evidence to learning](#)

Linh Hoang, GaneshAID

The coordinated Strategic Training Executive Programme (STEP 2.0) is a professionalisation programme to support managers of the health and supply chains in honing their abilities to lead change at the national level and manage teams. A key component of the STEP 2.0 programme is the opportunity to select the obstacles participants' supply chain systems are facing so that they can come up with resolutions and implement them as transformation challenges. A benchmarking exercise of these transformation challenges and solutions implemented in countries that have participated in STEP 2.0 allows for the documenting and analysis of the challenges and solutions that health supply chains in these countries are facing.

14:55 – 15:55 BREAKOUT SESSION 8

PANEL Institutionalization of STEP 2.0 in Cote d'Ivoire

In order to ensure the long-term sustainability of the Strategic training executive programme (STEP 2.0) the STEP 2.0 hub (managed by PtD) is taking steps to institutionalise the programme at the local and regional levels. STEP 2.0 in Côte d'Ivoire is the first example of this. This discussion will focus on what institutionalisation means in this context and what the future holds for the programme.

Moderator Dah el Hadj Sidi, Chemonics International **Facilitator** Walter Proper, IAPHL Emeritus/PtD

Panellists Kevin Etter, PtD/Gavi; Regina Kouassi, DAP; Aser Minoungou, ACAME; Sanjay Saha, Bee Skilled Global

DAY 2 Thursday, 7 March 2024

Supply chain innovations to expand access to healthcare: Case studies

Facilitator Davide Crewe-Brown, Vitalliance Corp

1 [Enhancing supply chain capacity to expand children's access to eyeglasses through a government-led school health programme in Uganda](#)

Isaac Okiring, Clinton Health Access Initiative, EYElliance

In Uganda, 11-15% of children experience visual impairment, impacting their education and future prospects. Refractive errors, the main cause of poor vision (over 80% in children), can be easily corrected with eyeglasses. However, inadequate supply chains result in approximately 75% of affected children not receiving necessary eyewear. The government, CHAI, and EYElliance worked together to establish eyeglass specifications, incorporating them into essential assistive product lists, and implemented capacity-building for supply chain personnel and educators.

2 [Phased introduction of new products: Introducing hormonal intrauterine devices during the COVID-19 pandemic in Zambia](#)

Nelia Banda, Clinton Health Access Initiative

The hormonal Intrauterine Device (IUD) is a highly effective contraceptive available in many countries but was not available in Zambia's public health facilities until recently. Many challenges affected the introduction of this product in Zambia, commodity stockouts. To address this, MOH and Zambia Medicines and Medical Supplies Agency (ZAMMSA) worked to strengthen the supply chain by using a phased approach for H-IUD scale-up by rolling out to four of the ten provinces. A linkage was created between the training of health providers and supply chain ensuring that limited HIUD stocks available were distributed to facilities with trained providers.

3 [Cold chain innovation and transforming HR to improve and expanding immunization reach: Pilot field trials of vaccine storage and transport devices in Ethiopia and South Sudan](#)

Tariku Berhanu, Independent consultant

In 2017, Ethiopia introduced Arktek—a portable, passive device designed to store vaccines at temperatures ranging from 2 to 8 degrees Celsius. This innovative device is especially useful in environments with limited or unreliable electricity access, maintaining the required temperature for up to 30 days.

PANEL Professionalisation through education pathways

In this discussion, the panellists will discuss the success factors that have been critical to the advancement of HR for supply chain management professionalisation in East Africa and Nigeria. The discussion will concentrate on the four essential pathways—staffing, skills, motivation, and working conditions—as fundamental components of supply chain professionalisation.

Moderator Rawinkhan Srinon, Mahidol University **Facilitator** Hilary Claire Frazer, People that Deliver

Panellists Domina Asingizwe, University of Rwanda, EAC RCE-VIHSCM; [Rebecca Alban](#), VillageReach; [Olushina Olajide-Ayoade](#), CIPS UK

16:00 – 16:30 **POSTERS**, tea & coffee

Workforce development in practice: Frameworks & approaches

Facilitator Jennifer Erie, USAID

1 [Moving the needle – How to move supply chain performances from underwhelming to excellent](#)

Victor dos Santos, Applisential (Pty) Ltd

Using the HR4SCM Framework, Mozambique's PHC supply chain was systematically mapped, aligning roles with competencies to identify gaps and tailor competency programs. This approach, supporting the goals of the CMAM organization and the Ministry of Health, enhances supply chain efficiency by documenting processes, defining every node, and ensuring individuals at each node possess necessary skills. Despite slow progress and ongoing technology upgrades, this comprehensive mapping and targeted training are expected to fully implement the Operating Model by July 2024, transforming the public healthcare supply chain into a resilient, agile system optimized for healthcare delivery.

2 [A virtual programme to equip local institutions to strengthen pharmaceutical systems](#)

Lauren Herzog, USAID MTaPS, Management Sciences for Health

Strengthening pharmaceutical systems is essential for strong health supply chains. Local institutions can transform these systems but they need skills to build and maintain these systems. This need is pronounced among French-speaking professionals when the relevant resources are only available in English. In 2023, the Medicines, Technologies and Pharmaceutical Services (MTaPS) Program piloted a virtual approach to develop pharmaceutical systems strengthening skills among local institutions.

3 [Delivering routine immunization vaccines and other PHC commodities for equity \(DRIVE\) initiative](#)

Buya Jallow, UNICEF Supply Division

Many LMICs do not have existing systems or resources to operate and maintain a consistent and efficient distribution system at the last mile. Instead, the burden often lies on health workers. The DRIVE Initiative supports the designing and implementation of context-specific last mile supply chain delivery solutions in countries at the intersection of high un- and under-immunized populations and low supply chain performance. With a core consideration of sustainability and local ownership, community-based stakeholders, young people and other local stakeholders will be engaged through innovative business models for supply chain last mile delivery.

PANEL Traceability: Unlocking the human potential for the next supply chain revolution

In 2017, WHO estimated 1 in 10 medical products circulating in low- and middle-income countries were substandard or falsified. To overcome this issue, an effective supply chain traceability system, managed by the supply chain workforce, is essential. GS1 standards are one tool that traces products from the manufacturer to the patient and contributes to detecting counterfeit products. This panel will focus on how staff can integrate new traceability efforts into their day-to-day responsibilities.

Moderator Rawinkhan Srinon and Thananya Wasusri, Mahidol University Facilitator David Crewe-Brown, Vitalliance Corp

Panellists Lindabeth Doby, USAID; Violet Ketani, USAID GHSC-PSM Project; Duangpun Kritchanhai, Mahidol University;

Geraldine Lissalde-Bonnet, GS1 Global

DAY 2 Thursday, 7 March 2024

PANEL Leadership and stewardship of the supply chain workforce: Health systems for the future

This VillageReach-organised panel focuses on the essential roles of leadership and stewardship in public health supply chain management. Key to primary health care, effective leadership navigates the complexities of ensuring the availability, accessibility, and affordability of health products, particularly in under-reached communities. The discussion will delve into the critical lessons from the COVID-19 pandemic, highlighting the challenges and strategies of leaders from government, health sectors, and NGOs. It aims to identify paths toward developing resilient leaders capable of enhancing health supply chains and advancing universal health coverage through overcoming obstacles and promoting inclusion.

Moderator Tapiwa Mukwashi, VillageReach **Facilitator** Katrina Tyson, Health 4 Development

Panellists Kofi Aboagye-Nyame, Management Sciences for Health; Dr Evelyne Kahare, MOH Kenya; Pamela Steele, Pamela Steele Associates

17:40 CLOSING

Paul Lalvani, Empower School of Health

18:30 – 23:00 EVENING ENTERTAINMENT

Celebrating health supply chains with the USAID MTaPS Program

Join us for an informal session on strengthening health supply chains through a systems approach with fascinating insights from the USAID MTaPS Program. *Followed by food and dancing.*

DAY 3 Friday, 8 March 2024

08:30 – 08:45 OPENING

Not your usual welcome...

Speakers Timi Omole, IAPHL; Douglas Kent, ASCM

Arrive on time for your chance to win a prize!

08:45 – 10:15 INTERACTIVE SESSION

Co-creating the future part 1: Elevating workforce voices and visions

Drawing on [futures and foresight](#) methods, participants will be asked to envision possible health supply chain futures and explore the roles and influence of the workforce.

On the morning of day three of the PtD Global Indaba, the International Association of Public Health Practitioners (IAPHL) welcomes you to a two-part series of interactive sessions focused on envisioning and co-creating the future of public health supply chains, with an emphasis on elevating workforce voices.

We will gather as a community of practitioners to dig deeper into the topics, approaches, and ideas surfaced over the course of the Indaba. Participants will have the opportunity to envision the future, explore emerging tools and solutions, gain/share knowledge and skills with peers, create connections and strengthen networks, and contribute to shaping IAPHL's strategic direction and agenda.

Moderator Christine Prefontaine, IAPHL

10:15 – 10:35 Tea & coffee

10:40 – 12:45 INTERACTIVE SESSION

Co-creating the future part 2: The workforce of the future

A series of [open sessions](#), proposed and led by Indaba participants, that dig deeper into the most pressing topics and issues facing the workforce of the future, and identify potential new directions and actions.

On the morning of day three of the PtD Global Indaba, the International Association of Public Health Practitioners (IAPHL) welcomes you to a two-part series of interactive sessions focused on envisioning and co-creating the future of public health supply chains, with an emphasis on elevating workforce voices.

We will gather as a community of practitioners to dig deeper into the topics, approaches, and ideas surfaced over the course of the Indaba. Participants will have the opportunity to envision the future, explore emerging tools and solutions, gain/share knowledge and skills with peers, create connections and strengthen networks, and contribute to shaping IAPHL's strategic direction and agenda.

Moderator Christine Prefontaine, IAPHL

12:45 – 13:45 Lunch

DAY 3 Friday, 8 March 2024

13:45 – 15:45 WORKSHOP

How mature is your supply chain?

Join us for an exciting afternoon session where we learn the insights gathered from an assessment that will have been shared before the PtD Global Indaba. We'll explore the maturity stages across various supply chains, identify constraints hindering progress, and uncover promising opportunities. Discover the latest advancements in the Maturity Model, now in its exceptional 9th version, tailored specifically for the public health sector. This model offers a comprehensive framework for structuring and prioritizing enhancements to healthcare supply chains. Moreover, it facilitates seamless collaboration among teams and partner organizations, enabling efficient resource allocation and the implementation of sustainable changes. If you're committed to optimizing your supply chains, this session is a must-attend event.

Speakers Douglas Kent, ASCM; Fernanda Debellian, ASCM; Grant Swanepoel, ASCM

15:50 – 16:10 Tea & coffee

16:10 – 16:35 IMPULSE TALKS

The Indaba's answer to TED talks

Moderator Ed Llewellyn, GFF

- 1 **Private sector engagement: What are we so afraid of?** Kevin Etter, PtD/Gavi
- 2 **Engaging youth in supply chain management,** Pamela Steele, PSA
- 3 **Innovation agenda: Are governments in the driver's seat?** Dorothy Leab, GaneshAID

16:40 – 17:15 CLOSING

PtD Global Indaba closing ceremony

Speakers Kofi Aboagye-Nyame, Management Sciences for Health; **Andrew Brown**, Management Sciences for Health; **Paul Lalvani**, Empower School of Health; **Timi Omole**, IAPHL; **Walter Proper**, IAPHL Emeritus/PtD; **Rawinkhan Srinon**, Mahidol University; **Dominique Zwinkels**, People that Deliver